Fill in this information to identify your c	ase:	
United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS		
Case number (if known):	Chapter you are filing under:  Chapter 7 Chapter 11 Chapter 12 Chapter 13	Check if this is an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Identify Yourself

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your	Joe	Tina
	government-issued picture identification (for example,	First Name	First Name
	your driver's license or	Eugene	Lynn
	passport).	Middle Name	Middle Name
	,	Uvalle	Uvalle
	Bring your picture identification to your meeting	Last Name	Last Name
	with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First Name	First Name
	Include your married or	Middle Name	Middle Name
	maiden names.	Last Name	Last Name
3.	Only the last 4 digits of		
	your Social Security	$xxx - xx - \underline{7} \underline{2} \underline{4} \underline{4}$	xxx - xx - 2  7  8  9
	number or federal Individual Taxpayer	OR	OR
	Identification number	9xx - xx	9xx - xx

	btor 1 btor 2	Joe Eugene Uvalle Tina Lynn Uvalle	Ca	se number (if known)
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
and En		usiness names mployer	☑ I have not used any business names or EINs.	✓ I have not used any business names or EINs.
	(EIN) y	ication Numbers ou have used in st 8 years	Business name	Business name
	Include	e trade names and	Business name	Business name
	doing i	ousiness as names	Business name	Business name
			EIN	EIN
			EIN	EIN
5.	Where	you live		If Debtor 2 lives at a different address:
			133 E. Bluebriar Dr.	. <u></u>
			Number Street	Number Street
			Granite Shoals TX 78654	
			City State ZIP Code	City State ZIP Code
			Burnet County	County
			the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	from yours, fill it in here. Note that the court will send any notices to you at this mailing address.
			Number Street	Number Street
			P.O. Box	P.O. Box
			City State ZIP Code	City State ZIP Code
6.		ou are choosing strict to file for	Check one:	Check one:
	bankrı		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
			I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)
P	art 2:	Tell the Court Ab	out Your Bankruptcy Case	
7.	Bankr	napter of the uptcy Code you	Check one: (For a brief description of each, see Noti for Bankruptcy (Form 2010)). Also, go to the top of p	ce Required by 11 U.S.C. § 342(b) for Individuals Filing age 1 and check the appropriate box.
	are ch under	oosing to file	Chapter 7	
			Chapter 11	
			Chapter 12	
			☐ Chapter 13	

Debtor 1

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle			Case number (if known)				
8.	How you will pay the fee	cou pay	ill pay the entire fee when I file my petition. In the formore details about how you may pay. The with cash, cashier's check, or money order. I half, your attorney may pay with a credit card o	ypically, if you are pay If your attorney is subr	ring the fee yourself, you may mitting your payment on your		
			I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).				
		By tha fee	quest that my fee be waived (You may requilaw, a judge may, but is not required to, waive n 150% of the official poverty line that applies in installments). If you choose this option, young Fee Waived (Official Form 103B) and file it	your fee, and may do to your family size and u must fill out the App	so only if your income is less d you are unable to pay the		
9.	Have you filed for	<b>☑</b> No					
	bankruptcy within the last 8 years?	☐ Yes	S.				
		District	\	When	Case number		
		District			Case number		
		District	\	When	Case number		
10.	Are any bankruptcy	<b>☑</b> No					
	cases pending or being filed by a spouse who is	☐ Ye	3.				
	not filing this case with you, or by a business	Debtor		Relationsh	ip to you		
	partner, or by an	District	\		Case number,		
	affiliate?			MM / DD / YYYY	if known		
		Debtor		Relationsh	ip to you		
		District	\		Case number,		
				MM / DD / YYYY	if known		
11.	Do you rent your residence?	✓ No ☐ Yes	Go to line 12.  Has your landlord obtained an eviction judge.	gment against you?			
			<ul><li>No. Go to line 12.</li><li>☐ Yes. Fill out Initial Statement About a and file it as part of this bankruptcy per</li></ul>	-	Against You (Form 101A)		

	tor 1 Joe Eugene Uvalle tor 2 Tina Lynn Uvalle					Case number	(if known)		
Pa	Report About Ar	ıy Bı	usine	sses You Own as	a Sole P	- Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	<b>☑</b>		Go to Part 4. Name and location of b	usiness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			Name of business, if any  Number Street					
	If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.			Single Asset Rea	ness (as d al Estate (a defined in <sup>2</sup> er (as defir	escribe your business defined in 11 U.S.C. § as defined in 11 U.S. 11 U.S.C. § 101(53A ned in 11 U.S.C. § 10	§ 101(27A)) C. § 101(51B) .))	ZIP Coo	le
Chapt Bankr are yo	Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i>	car mo:	set ap st rece	filing under Chapter 11, opropriate deadlines. If nt balance sheet, staten f these documents do n	you indicat nent of ope	ite that you are a sma erations, cash-flow st	all business de tatement, and	ebtor, you i federal inc	must attach your come tax return
	debtor?	$\checkmark$	No.	I am not filing under C	hapter 11.				
	For a definition of small business debtor, see		No.	I am filing under Chap the Bankruptcy Code.	ter 11, but	: I am NOT a small b	usiness debto	r according	g to the definition in
	11 U.S.C. § 101(51D).		Yes.	I am filing under Chap Bankruptcy Code.	ter 11 and	l am a small busine	ss debtor acc	ording to th	ne definition in the
Pa	Report If You Ov	vn o	r Hav	e Any Hazardous I	roperty	or Any Propert	y That Nee	eds Imm	ediate Attention
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or			What is the hazard?					
	safety? Or do you own any property that needs immediate attention?			If immediate attention	is needed,	, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where is the property	? Number	Street			
					City			State	ZIP Code

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

credit counseling because of:					
☐ Inc	capacity.	I have a mental illness or a menta deficiency that makes me			
		incopable of realizing or making			

☐ I am not required to receive a briefing about

incapable of realizing or making rational decisions about finances.

through the internet, even after I

 □ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

Active duty. I am currently on active military

reasonably tried to do so.

duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case): You must check one:

 I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am	not	require	d to	receive	e a	briefing	abou
				ecause			

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

My physical disability causes me □ Disability. to be unable to participate in a briefing in person, by phone, or

> through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Debtor 1 Joe Eugene Uvalle Debtor 2 **Tina Lynn Uvalle** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do you 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) have? as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.  $oldsymbol{
olimits}$ 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. П Yes. Go to line 17. State the type of debts you owe that are not consumer or business debts. 17. Are you filing under Chapter 7? I am not filing under Chapter 7. Go to line 18. No. Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and Do you estimate that after administrative expenses are paid that funds will be available to distribute to unsecured creditors? any exempt property is excluded and **☑** No administrative expenses are paid that funds will be ☐ Yes available for distribution to unsecured creditors? 18. How many creditors do 25,001-50,000 1-49 1,000-5,000 you estimate that you 50,001-100,000 50-99 5,001-10,000 owe? More than 100,000 100-199 10,001-25,000 200-999 19. How much do you \$1,000,001-\$10 million \$500,000,001-\$1 billion \$0-\$50,000 estimate your assets to \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion be worth? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion  $\square$ \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion 20. How much do you \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion П

\$10,000,001-\$50 million

\$50,000,001-\$100 million

\$100,000,001-\$500 million

estimate your liabilities to

be?

\$50,001-\$100,000

\$100,001-\$500,000

\$500,001-\$1 million

 $\sqrt{\phantom{a}}$ 

П

\$1,000,000,001-\$10 billion

\$10,000,000,001-\$50 billion

More than \$50 billion

П

Debtor 1	Joe Eugene Uvalle	
Debtor 2	Tina Lynn Uvalle	Case number (if known)
		<del></del>

### Part 7:

Sign Below

#### For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Joe Eugene Uvalle

Joe Eugene Uvalle, Debtor 1

X /s/ Tina Lynn Uvalle

Tina Lynn Uvalle, Debtor 2

Executed on  $\frac{11/21/2019}{\text{MM / DD / YYYY}}$  Executed on  $\frac{11/21/2019}{\text{MM / DD / YYYY}}$ 

Debtor 1 Debtor 2	Joe Eugene Uvalle Tina Lynn Uvalle			Case number (if kno	wn)	
For your at epresente	ttorney, if you are d by one	eligibility to procee	ed under Chapter 7, 11, 12, c	or 13 of title 11, United S	ve informed the debtor(s) about tates Code, and have explained the so certify that I have delivered to	е
f you are not represented by an attorney, you do not need o file this page.		the debtor(s) the no	otice required by 11 U.S.C.	§ 342(b) and, in a case i	n which § 707(b)(4)(D) applies, the schedules filed with the petitio	า
		X /s/ H. Bryan F Signature of Att	Hicks torney for Debtor	Dat	e 11/21/2019 MM / DD / YYYY	
		H. Bryan Hicl	ks			
		Printed name  H. Bryan Hicl	ks			
		Firm Name				
		901 2nd St. Number	Street			
		Marble Falls City		TX State	78654 ZIP Code	
		•	(000) 000 0405			
		Contact phone	(830) 693-2165	_ Email address <b>brya</b>	n@bryanhickslaw.com	

TX State

**09576400** Bar number

Debtor 1	Joe Eu	ıgene	Uvalle			
Debior 1		ddle Name	Last Name			
Debtor 2	Tina Lv	'nn	Uvalle			
(Spouse, if filing		ddle Name	Last Name			
United States B	ankruptcy Court for the: <b>W</b>	ESTERN DI	STRICT OF TEXAS			
Case number				<b>-</b>		
(if known)				_	if this is an ded filing	
Official Forn	n 106A/B					
Schedule A	VB: Property				12/15	
1. Do you own	or have any legal or equ		ng, Land, or Other Real E		e an Interest In	
<b>√</b> Yes. W	/here is the property?	What is t	he property?	Do not deduct secured cla	ims or exemptions. Put the	
133 E. Bluebria	ar Dr. ailable, or other description	Check all	that apply. e-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
		Duple	ex or multi-unit building ominium or cooperative	Current value of the entire property?	Current value of the portion you own?	
<b>Granite Shoals</b>	TX 78654	☐ Manu	factured or mobile home	\$78,000.00	\$78,000.00	
City State ZIP Code  Burnet		Land Inves Times Other		Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.		
County				Fee Simple		
	ar Dr., Granite Shoals,	TX Who has Check on	an interest in the property? e.		_	
78654		☐ Debto	or 1 only	Check if this is comm	nunity property	
		Debto	or 2 only	(see instructions)		
		ست	or 1 and Debtor 2 only			
		At lea	ast one of the debtors and anothe	er		
			ormation you wish to add abou identification number:	ut this item, such as local		

	jene Uvalle nn Uvalle	Cas	se number (if known)		
1.2. <b>58210 Sweetbriar Lot 15-A</b> Street address, if available, or other description		What is the property? Check all that apply.  Single-family home	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		
		Duplex or multi-unit building Condominium or cooperative	Current value of the entire property?	Current value of the portion you own?	
Granite Shoals	TX 78654	☐ Manufactured or mobile home	\$24,079.00	\$12,040.00	
City State ZIP Code  Burnet County		✓ Land ☐ Investment property ☐ Timeshare ☐ Other	Describe the nature of yo interest (such as fee simple entireties, or a life estate)	ole, tenancy by the	
ŕ		Who has an interest in the property? Check one.	50% undivided interest	<u>:                                    </u>	
		<ul> <li>□ Debtor 1 only</li> <li>□ Debtor 2 only</li> <li>□ Debtor 1 and Debtor 2 only</li> <li>□ At least one of the debtors and another</li> </ul>	Check if this is community property (see instructions)		
		Other information you wish to add about property identification number:	this item, such as local	_	
		own for all of your entries from Part 1, incl r Part 1. Write that number here	_	\$90,040.00	
Part 2: Descr	ibe Your Vehicles				
you own that someone	else drives. If you leas	le interest in any vehicles, whether they are a vehicle, also report it on Schedule G: Executy vehicles, motorcycles	_	•	
3.1. Make:	Ford	Who has an interest in the property? Check one.	Do not deduct secured clai amount of any secured clai	ms on Schedule D:	
Model: Year:	<u>Taurus</u> <u>2008</u>	□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of the entire property?		
Approximate mileage:	150,000	✓ Debtor 1 and Debtor 2 only ✓ At least one of the debtors and another		\$3,373.00	
Other information:					
2008 Ford Taurus ( miles)	approx. 150,000				
3.2. Make:	Chevy	Who has an interest in the property?  Check one.  Debtor 1 only	Do not deduct secured clai amount of any secured clai Creditors Who Have Claim	ms on Schedule D:	
Model: Year:	Suburban 1989	Debtor 2 only	Current value of the	Current value of the	
Approximate mileage:	-	Debtor 1 and Debtor 2 only	entire property?	portion you own?	
Other information:		At least one of the debtors and another	\$800.00	\$800.00	
1989 Chevy Suburk 289,000 miles)	oan (approx.	Check if this is community property (see instructions)			

Debte		Joe Eugene Tina Lynn U			Case number (if known)	
3.3. Make		<u>Jee</u> Pat	ep riot	Who has an interest in the property? Check one.  Debtor 1 only	amount of any secured	claims or exemptions. Put the claims on Schedule D: aims Secured by Property.
Year		201	5	Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Appro	oximate	e mileage:		Debtor 1 and Debtor 2 only  At least one of the debtors and an		· · · · · · · · · · · · · · · · · · ·
Othe	r inform	nation:			φ14,300.00	Ψ14,300.00
2015	Jeep	Patriot		Check if this is community prop (see instructions)	erty	
				s and other recreational vehicles, othe al watercraft, fishing vessels, snowmobi		
	✓ No ☐ Ye					
				own for all of your entries from Part 2 Part 2. Write that number here		\$19,073.00
Pa	rt 3:	Describe	Your Personal	and Household Items		
Do y	ou owr	n or have any l	egal or equitable ir	nterest in any of the following items?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
	Examp ☐ No		-	ens, china, kitchenware		\$600.00
	Electro			page(o).		
		les: Television		video, stereo, and digital equipment; co evices including cell phones, cameras, r	•	
	☐ No ✓ Ye		See continuatio	n page(s).		\$390.00
8.				gs, prints, or other artwork; books, pictu		
	✓ No ☐ Yes	s. Describe				
			otographic, exercise	e, and other hobby equipment; bicycles, tools; musical instruments	pool tables, golf clubs, skis;	
	✓ No ☐ Yes	s. Describe				
-	Firearn Examp		es, shotguns, ammu	unition, and related equipment		
	□ No ✓ Yes		See continuatio	n page(s).		\$155.00

Deb		Joe Eugene			
Deb	101 2	Tina Lynn U	valle	Case number (if known)	
11.			lothes, furs, le	eather coats, designer wear, shoes, accessories	
	□ No ☑ Yes	. Describe	See contin	uation page(s).	\$450.00
12.	<b>Jewelry</b> Example		-	ne jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	
	□ No ☑ Yes	. Describe	See contin	uation page(s).	\$250.00
13.		m animals es: Dogs, cats	, birds, horses		
		. Describe			]
14.	did not	-	nd household	d items you did not already list, including any health aids you	
	☐ No ✓ Yes	. Give specific	;		1
	info	rmation	. Tens unit	health aid	\$200.00
15.				entries from Part 3, including any entries for pages you have	\$2,045.00
Pa	art 4:	Describe	Your Finar	ncial Assets	
Do y	ou own	or have any le	egal or equita	able interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	Cash Example	es: Money you petition	have in your	wallet, in your home, in a safe deposit box, and on hand when you file your	
	✓ No ☐ Yes				·
17.	•	-	houses, and o	her financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same	
	□ No ☑ Yes			Institution name:	
	17.	1. Checking	account:	Compass	\$0.50
18.		mutual funds, es: Bond funds		raded stocks accounts with brokerage firms, money market accounts	
	✓ No ☐ Yes		Institutio	on or issuer name:	

	tor 1 tor 2	Joe Eugene Uva Tina Lynn Uvalle			Case number (if known)	
19.	-	-	and interests in inconership, and joint ve	orporated and unincorporated enture	businesses, including	
	info	s. Give specific rmation about m	Name of entity:		% of ownership:	
20.	Negotia	ble instruments incl	ude personal checks,	egotiable and non-negotiable cashiers' checks, promissory not transfer to someone by signing	otes, and money orders.	
	info	s. Give specific ormation about m	Issuer name:			
21.		nent or pension acc es: Interests in IRA, profit-sharing pla	ERISA, Keogh, 401(I	k), 403(b), thrift savings accoun	ts, or other pension or	
		s. List each ount separately. 1	ype of account:	Institution name:		
		4	01(k) or similar plan:	401(k) HEB Savings and F	Retirement Plan	\$52,771.63
22.	Your sh Exampl compar		posits you have made	e so that you may continue servent, public utilities (electric, gas,		
	✓ No ☐ Yes	S	Ins	stitution name or individual:		
23.	_			ment of money to you, either for	life or for a number of years)	
	✓ No	S	Issuer name and des	scription:		
24.	Interes		RA, in an account in		under a qualified state tuition pro	gram.
	✓ No	š	Institution name and	description. Separately file the	records of any interests. 11 U.S.C.	§ 521(c)
25.		equitable or future exercisable for yo		y (other than anything listed in	n line 1), and rights or	
	_	s. Give specific rmation about them				
26.				s, and other intellectual proper oceeds from royalties and licens	•	
		s. Give specific rmation about them				
27.			other general intang		s, liquor licenses, professional licens	es
	<b>☑</b> No					
		s. Give specific ormation about them			-	

	tor 1 tor 2	Joe Eugene Uvalle Tina Lynn Uvalle		_ Case number (if known)	)	
Mor	ney or p	roperty owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	funds owed to you				
29.	abo you and	s. Give specific information out them, including whether u already filed the returns d the tax years	limony, spousal support, child support, ma	intenance, divorce settlement	Federal State: Local:	
	□ No ✓ Ye	s. Give specific information		Alimony:		\$0.00
	S		- son's father - 16,532.06	Maintenar	nce:	\$0.00
	A	iton Jones - nepnew's fa	ther - 10,000. Amt: \$26,532.06	Support:		\$26,532.06
				Divorce se	ettlement	\$0.00
				Property s	ettlemen	t: <b>\$0.00</b> _
31.	Interes Examp No Yes	s. Give specific information  sts in insurance policies  les: Health, disability, or life i  s. Name the insurance  mpany of each policy	insurance; health savings account (HSA);	credit, homeowner's, or rente		
32.	Any in		e you from someone who has died trust, expect proceeds from a life insuranc	Beneficiary: e policy, or are currently	Su	irrender or refund value:
	<b>☑</b> No					
33.	Examp ✓ No	les: Accidents, employment	ther or not you have filed a lawsuit or madisputes, insurance claims, or rights to suc			
	☐ Ye	s. Describe each claim				
34.	rights	to set off claims	d claims of every nature, including coun	terclaims of the debtor and		
	✓ No	s. Describe each claim				
35.	Any fir	nancial assets you did not a	ılready list			
	✓ No ☐ Ye	s. Give specific information				

		Joe Eugene Uvalle Tina Lynn Uvalle Case number (if known)	
36.		e dollar value of all of your entries from Part 4, including any entries for pages you have ed for Part 4. Write that number here	\$79,304.19
P	art 5:	Describe Any Business-Related Property You Own or Have an Interest In. List any I	real estate in Part 1.
37.	Do you	u own or have any legal or equitable interest in any business-related property?	
		s. Go to Part 6.	
30	•		Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accoun	nts receivable or commissions you already earned	
	ست	s. Describe	
39.		equipment, furnishings, and supplies  les: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices	
	✓ No ☐ Yes	s. Describe	
40.	Machin	nery, fixtures, equipment, supplies you use in business, and tools of your trade	
	✓ No ☐ Yes	s. Describe	
41.	Invento	pry	
	✓ No ☐ Yes	s. Describe	
42.	Interes	sts in partnerships or joint ventures	
	_	s. Describe Name of entity: % of ownership:	
43.	Custom	mer lists, mailing lists, or other compilations	
	✓ No ☐ Yes	s. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  No Yes. Describe	
44.	Any bu	usiness-related property you did not already list	
	_	s. Give specific information.	
45.		e dollar value of all of your entries from Part 5, including any entries for pages you have ed for Part 5. Write that number here	\$0.00

Debtor 1 Debtor 2		Joe Eugene Uvalle Tina Lynn Uvalle	Case number (if known)		
Pa		Describe Any Farm- and Commercial Fishing-Related Pro If you own or have an interest in farmland, list it in Part 1.	operty You Own or Have an Interest In.		
46.	Do you	ມ own or have any legal or equitable interest in any farm- or commercia	al fishing-related property?		
	ك	s. Go to Part 7.			
	-		Current value of the portion you own?  Do not deduct secured claims or exemptions.		
47.	Farm a Example	<b>nnmals</b> <i>les</i> : Livestock, poultry, farm-raised fish			
	✓ No ☐ Yes				
	☐ Yes	,			
48.	Crops-	either growing or harvested			
		s. Give specific ormation			
49.	Farm a	and fishing equipment, implements, machinery, fixtures, and tools of tr	rade		
	✓ No				
50.	Farm a	and fishing supplies, chemicals, and feed			
	☑ No □ Yes				
51.	Any fa	rm- and commercial fishing-related property you did not already list			
		s. Give specific ormation			
52.		e dollar value of all of your entries from Part 6, including any entries for ed for Part 6. Write that number here			
Pá	art 7:	Describe All Property You Own or Have an Interest in The	nat You Did Not List Above		
53.		u have other property of any kind you did not already list?  bles: Season tickets, country club membership			
	✓ No ☐ Yes	s. Give specific information.	<b>-</b>		
54.	Add th	e dollar value of all of your entries from Part 7. Write that number here	e <b>→</b> \$0.00		

Case number (if known)

# Part 8: List the Totals of Each Part of this Form

55.	Part 1: Total real estate, line 2		<del>-</del>		\$90,040.00
56.	Part 2: Total vehicles, line 5	\$19,073.00			
57.	Part 3: Total personal and household items, line 15	\$2,045.00			
58.	Part 4: Total financial assets, line 36	\$79,304.19			
59.	Part 5: Total business-related property, line 45	\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7: Total other property not listed, line 54	\$0.00			
62.	Total personal property. Add lines 56 through 61	\$100,422.19	Copy personal property total	+	\$100,422.19
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$190,462.19

Case number (if known)

6.	Household goods and furnishings (details):	
	Stove	\$50.00
	Refrigerator	\$50.00
	Couch	\$50.00
	Couch	\$50.00
	Bed	\$40.00
	Bed	\$35.00
	Bed	\$35.00
	End tables	\$25.00
	Washer	\$50.00
	Dryer	\$30.00
	Small appliances	\$20.00
	Kitchen island	\$30.00
	47 inch tv	\$60.00
	32 inch tv	\$25.00
	Books	\$50.00
7.	Electronics (details):	
	Xbox	\$25.00
	Laptop	\$100.00
	Printer	\$25.00
	2 cell phones	\$200.00
	weight bar	\$40.00
10.	Firearms (details):	
	Lever action rifle	\$70.00
	Marlin 3030	\$85.00
11.	Clothes (details):	
	Mens clothing	\$150.00
	Women's clothing	\$300.00
12.	Jewelry (details):	
	Wedding and engagement ring	\$200.00
	Costume jewelry	\$50.00

	formation to ident	tify your o	ase:			
Debtor 1	Joe	Eugene	Uvalle			
Debtor 2	First Name <b>Tina</b>	Middle Name Lynn	Last Name <b>Uvalle</b>			
(Spouse, if filing)		Middle Name				
United States Ba	ankruptcy Court for the:	: WESTERI	N DISTRICT OF TE	EXAS	<u> </u>	Check if this is an
Case number (if known)						amended filing
Official Form	า 106C					
Schedule C	: The Property	You Cla	aim as Exemp	ot		04/19
Using the property space is needed, f	you listed on Schedul	le A/B: Prope s page as ma	erty (Official Form 10	6A/B)	as your source, list the	esponsible for supplying correct information. e property that you claim as exempt. If more ssary. On the top of any additional pages,
is to state a spec exempted up to the receive certain be exemption of 100	ific dollar amount as on the amount of any appeneits, and tax-exem	exempt. Alt blicable statu pt retirement e under a la	ternatively, you may utory limit. Some ex nt fundsmay be unl w that limits the exe	clair cemp imite mpti	n the full fair market vitionssuch as those f d in dollar amount. H on to a particular doll	rou claim. One way of doing so ralue of the property being for health aids, rights to lowever, if you claim an ar amount and the value of the e statutory amount.
Part 1: Ide	entify the Property	y You Cla	im as Exempt			
1. Which set of	exemptions are you	claiming?	Check one only,	even	if your spouse is filing	with you.
	claiming state and fed			11 U.	S.C. § 522(b)(3)	
2. For any prop	perty you list on Sche	edule A/B th	at you claim as exer	npt, f	ill in the information I	pelow.
	of the property and li at lists this property		Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption
			Copy the value from	Che	eck only one box for	
			Schedule A/B		h exemption	
Brief description:				eac	•	11 U.S.C. § 522(d)(1)
133 E. Bluebria	r Dr., Granite Shoal	s, TX	\$78,000.00		\$23,291.00 100% of fair market	11 U.S.C. § 522(d)(1)
133 E. Bluebria 78654		∣s, TX		eac	\$23,291.00	11 U.S.C. § 522(d)(1)
133 E. Bluebria 78654 Line from <i>Schedul</i> Brief description:	le A/B: 1.1	s, TX		eac	\$23,291.00 100% of fair market value, up to any applicable statutory	11 U.S.C. § 522(d)(1)  11 U.S.C. § 522(d)(5)
Brief description: 133 E. Bluebria: 78654 Line from Schedul Brief description: 58210 Sweetbri Line from Schedul	le A/B: 1.1	s, TX	\$78,000.00	eac	\$23,291.00 100% of fair market value, up to any applicable statutory limit	

Case number (if	known)	
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	1	
Part 2:	Additional Page	

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	ount of the mption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	ck only one box for h exemption	
Brief description:  2008 Ford Taurus (approx. 150,000 miles)  Line from Schedule A/B:3.1	\$3,373.00	\$3,373.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
Brief description: 2015 Jeep Patriot Line from Schedule A/B:3.3	\$14,900.00	\$1,500.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(2)
Brief description: Stove Line from Schedule A/B:6	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: <b>Refrigerator</b> Line from <i>Schedule A/B</i> : <b>6</b>	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description:  Couch  Line from Schedule A/B:6	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description:  Couch  Line from Schedule A/B:6	\$50.00	\$50.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: <b>Bed</b> Line from <i>Schedule A/B</i> :6	\$40.00	\$40.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: <b>Bed</b> Line from <i>Schedule A/B</i> :6	\$35.00	\$35.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)
Brief description: <b>Bed</b> Line from <i>Schedule A/B</i> :6	\$35.00	\$35.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)

Debtor 1 Joe Eugene Uvalle
Debtor 2 Tina Lynn Uvalle

Case number (if known)

	•	_	
Part 2:	Additional Page		

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the mption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B		ck only one box for h exemption			
Brief description: End tables	\$25.00	$\Box$	<b>\$25.00</b> 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B:6			value, up to any applicable statutory limit			
Brief description: Washer	\$50.00	$\square$	\$50.00 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B:6			value, up to any applicable statutory limit			
Brief description:  Dryer	\$30.00	$\square$	\$30.00 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B:6			value, up to any applicable statutory limit			
Brief description: Small appliances	\$20.00	$\square$	\$20.00 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B:6			value, up to any applicable statutory limit			
Brief description:  Kitchen island	\$30.00	<b>I</b>	\$30.00 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B:6			value, up to any applicable statutory limit			
Brief description: 47 inch tv	\$60.00	<b>V</b>	\$60.00 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B:6			value, up to any applicable statutory limit			
Brief description: 32 inch tv	\$25.00	Ø	\$25.00 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B:6			value, up to any applicable statutory limit			
Brief description: Books	\$50.00	<b>1</b>	\$50.00 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B:6			value, up to any applicable statutory limit			
Brief description:	\$25.00	Ø	\$25.00 100% of fair market	11 U.S.C. § 522(d)(3)		
Line from Schedule A/B: <b>7</b>			value, up to any applicable statutory limit			

Case number (if	known)	
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Part 24 Additional Page	Part 2:	Additional Page
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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
	Copy the value from Schedule A/B	Check only one box for each exemption			
Brief description:  Laptop  Line from Schedule A/B:7	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Brief description: Printer Line from Schedule A/B:	\$25.00	\$25.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Brief description:  2 cell phones  Line from Schedule A/B:	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Brief description:  weight bar  Line from Schedule A/B:	\$40.00	\$40.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Brief description:  Lever action rifle  Line from Schedule A/B:10	\$70.00	\$70.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)		
Brief description:  Marlin 3030  Line from Schedule A/B:10	\$85.00	\$85.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(5)		
Brief description:  Mens clothing  Line from Schedule A/B:11	\$150.00	\$150.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Brief description:  Women's clothing  Line from Schedule A/B:11	\$300.00	\$300.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(3)		
Brief description:  Wedding and engagement ring  Line from Schedule A/B:12	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(4)		

Debtor 1 Joe Eugene Uvalle Debtor 2 **Tina Lynn Uvalle** 

Line from Schedule A/B: 17.1

Brief description:

Case number (if known)

11 U.S.C. § 522(d)(12)

Part 2:	Additional Page						
Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	the portion you exemption you claim		Specific laws that allow exemption		
		Copy the value from Schedule A/B		eck only one box for h exemption			
Brief descripti Costume je		\$50.00		\$50.00 100% of fair market	11 U.S.C. § 522(d)(4)		
Line from Schedule A/B: 12				value, up to any applicable statutory limit			
Brief descripti Tens unit he		\$200.00	<b>☑</b>	\$200.00 100% of fair market	11 U.S.C. § 522(d)(9)		
Line from Sch	nedule A/B: <b>14</b>			value, up to any applicable statutory limit			
Brief descripti Compass	on:	\$0.50	$\Box$	\$0.50 100% of fair market	11 U.S.C. § 522(d)(5)		

value, up to any

limit

abla

applicable statutory

\$52,771.63

401(k) HEB Savings and Retirement Plan	100% of fair market
Line from Schedule A/B:21	value, up to any applicable statutory limit

\$52,771.63

Brief description:	\$26,532.06	V	\$26,532.06	11 U.S.C. § 522(d)(10)(D)
David Gonzales - son's father - 16,532.06		一一	100% of fair market	
Alton Jones - nephew's father - 10,000			value, up to any	
Line from Schedule A/B: 29			applicable statutory	
			limit	

Fill in this inf	ormation to ider	ntify your case	<b>:</b> :			
Debtor 1	Joe	Eugene	Uvalle			
	First Name	Middle Name	Last Name			
Debtor 2	Tina	Lynn Middle News	Uvalle			
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the	e: <u>western di</u>	STRICT OF TEXAS			
Case number					☐ Check if this is	e an
(if known)					amended filing	
Official Form	106D					
				D		4044
Schedule D:	Creditors W	no Have Cla	aims Secured b	y Property		12/15
correct informatio On the top of any  1. Do any credit  No. Che Yes. Fill  Part 1: Lis  2. List all secure claim, list the creditor has a	n. If more space is additional pages, we cors have claims seed this box and submin all of the information of the information of the information of the claims. If a credit creditor separately for particular claim, list to the claims in the c	needed, copy the rite your name at cured by your proit this form to the on below.  aims  tor has more than or each claim. If much other creditors	one secured ore than one in Part 2. As	t out, number the entri wn).	es, and attach it to thi	s form.
2.1		Describe the	e property that	442 422 22	*******	
Benny Boyd Ma	rbio Falle	secures the	claim:	\$13,400.00	\$14,900.00	
Creditor's name	i Die i alis	— 2015 Jeep	Patriot			
3407 US-281 Number Street						
			te you file, the claim is	: Check all that apply.		
Marble Falls	TX 78654	Continge Unliquid				
City	State ZIP Code	Disputed				
Who owes the deb	ot? Check one.	<b>–</b>	en. Check all that apply	<i>'</i> .		
Debtor 1 only			ement you made (such		car loan)	
Debtor 2 only	Optor 2 only	Statutor	/ lien (such as tax lien,	mechanic's lien)		
Debtor 1 and D	peptor 2 only the debtors and anot		nt lien from a lawsuit			
_		Other (ii	cluding a right to offset			
Check if this of to a community	ty debt		se Money			
Date debt was inc	urred 2019	Last 4 digits	of account number			

Add the dollar value of your entries in Column A on this page. Write that number here:

\$13,400.00

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle		_ Case number (if	known)				
Part 1: Additional Page After listing any entries on sequentially from the previous		Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
2.2  Mr. Cooper Creditor's name	Describe the property that secures the claim: 133 E. Bluebriar Dr., Granite	\$54,709.00	\$78,000.00				
Attn: Bankruptcy Number Street 8950 Cypress Waters Blvd	Shoals, TX 78654						
Coppell TX 75019 City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply. An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset) Conventional Real Estate Mortgage						
Date debt was incurred 11/2017	Last 4 digits of account number	6 2 9 1					
OneMain Financial Creditor's name Attn: Bankruptcy Number Street PO Box 3251	Describe the property that secures the claim: 2008 Ford Taurus	\$8,990.00	\$0.00	\$8,990.00			
Evansville         IN         47731           City         State         ZIP Code	As of the date you file, the claim is:  Contingent Unliquidated Disputed	Check all that apply.					
Who owes the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☑ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☑ Check if this claim relates to a community debt	Nature of lien. Check all that apply.  ☐ An agreement you made (such as ☐ Statutory lien (such as tax lien, me ☐ Judgment lien from a lawsuit ☐ Other (including a right to offset) Secured		car loan)				

Add the dollar value of your entries in Column A on this page. Write that number here:

\$63,699.00

9 6 6 3

Date debt was incurred 12/2018

Last 4 digits of account number

Debtor 2	Tina Lynn Uvalle	Case number (i	f known)	
Part 1:	Additional Page After listing any entries on this page, number them sequentially from the previous page.	Column A  Amount of claim  Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any

2.4  TD Auto Finance Creditor's name Attn: Bankruptcy Dept	Describe the property that secures the claim: 1989 Suburban	\$12,175.00	\$800.00	\$11,375.00
Number Street PO Box 9223				
	As of the date you file, the claim is:	Check all that apply.		
Farmington Hills MI 48333 City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Contingent Unliquidated Disputed  Nature of lien. Check all that apply. An agreement you made (such as Statutory lien (such as tax lien, me Judgment lien from a lawsuit Other (including a right to offset)		loan)	
Check if this claim relates to a community debt	Automobile			
Date debt was incurred 08/2017	Last 4 digits of account number	7 3 7 5		

Add the dollar value of your entries in Column A on this page. Write that number here:

£00.074

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$89,274.00

\$12,175.00

Fill in this inf	ormation to	identify your c	ase	e:						
Debtor 1	Joe	Eugene		Uvalle						
	First Name	Middle Name		Last Name						
Debtor 2	Tina	Lynn		Uvalle						
(Spouse, if filing)	First Name	Middle Name		Last Name						
United States Bar	nkruptcy Court f	or the: WESTERN	N DI	STRICT OF TEXAS						
Case number (if known)									Check if this is a	ın
000 : 15	4005/5								amended filing	
Official Form		\A//s = 1.1		lu a a a coma di Claima						4045
Schedule E/	F: Credito	rs wno Hav	e c	Insecured Claims						12/15
Part 1: Lis  1. Do any credit  No. Go t  Yes.  2. List all of you claim. For ear show both price	t All of Your tors have priori to Part 2.  ur priority unse th claim listed, i brity and nonpriority and nonpriority	ty unsecured claims. If a dentify what type outing amounts. As n	ms a		unsed rity ar	cured ond non	claim, priorit	ty amo	ounts, list that clair	n here and or's name. If
	other creditors in		,							<b>F</b>
(For an explar	nation of each ty	pe of claim, see the	e ins	structions for this form in the ins	truction			_		
						Total	clain	n	Priority amount	Nonpriority amount
									amount	amount
2.1					_	\$	1,700	.00	\$1,700.00	\$0.00
Attorney General Priority Creditor's Nam		ort Division	- La	st 4 digits of account number	6	3	5	8		
Attn: Bankruptc			w	nen was the debt incurred?	03/2	 21/20 <sup>,</sup>		_		
Number Street PO Box 12017									_	
1 O DOX 12017			- As	of the date you file, the claim	is: (	Check	all tha	at app	ly.	
			- 누	Contingent Unliquidated						
Austin City	TX State	<b>78711</b> ZIP Code	- 🗖	Disputed						
Who incurred the			Τv	pe of PRIORITY unsecured cla	aim:					
ш	Debtor 2 only the debtors and			Domestic support obligations Taxes and certain other debts Claims for death or personal in intoxicated Other. Specify	you				ent	
Is the claim subject No		,		117						

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle	Case number (if known)	
Part 2: List All of Your NONPRIORIT	Y Unsecured Claims	
Yes  4. List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unse type of claim it is. Do not list claims already inc	in the alphabetical order of the creditor who holds each claim.  cured claim, list the creditor separately for each claim. For each claim listed, idealuded in Part 1. If more than one creditor holds a particular claim, list the other cursecured claims, fill out the Continuation Page of Part 2.	•
Amex Nonpriority Creditor's Name Correspondence/Bankruptcy Number Street PO Box 981540  EI Paso TX 79998 City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number 8 9 7 3  When was the debt incurred? 04/2017  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card	\$1,434.00
Aurora Behavioral Health System  Nonpriority Creditor's Name P.O. Box 22248  Number Street  Paducah KY 40252-0248  City State ZIP Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt is the claim subject to offset?  No Yes	Last 4 digits of account number 1 2 3 5  When was the debt incurred? 3/13/2019  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Arrearage	\$820.00

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	After listing any entries on this page, number them sequentially from the	
4.3		\$652.54
Baylor Scott & White	Last 4 digits of account number 1 3 1 1	
Nonpriority Creditor's Name P.O. Box 1259	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated	
Oaks PA 19456	Disputed	
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim:  ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt  Is the claim subject to offset? ☐ No ☐ Yes	Fee Simple	
4.4		\$265.27
Baylor Scott & White	_ Last 4 digits of account number _ 9 _ 1 _ 0 _ 6_	
Nonpriority Creditor's Name P.O. Box 1259	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_	
Online DA 404EC	Disputed	
Oaks         PA         19456           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Fee Simple	
Is the claim subject to offset?  ✓ No  ── Yes		
4.5		\$635.96
Baylor Scott & White Nonpriority Creditor's Name	_ Last 4 digits of account number _ 1 _ 3 _ 1 _ 1	
P.O. Box 1259	When was the debt incurred?	
Number Street	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> <li>         □ Contingent     </li> </ul>	
	Unliquidated	
Oaks PA 19456	Disputed	
Oaks         PA         19456           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt	Fee Simple	
Is the claim subject to offset?		
✓ No ☐ Yes		

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle	Case number (if known)	
Part 2: Your NONPRIORITY Unsecu	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.6		\$384.79
Baylor Scott & White	Last 4 digits of account number 1 1 8 2	
Nonpriority Creditor's Name P.O. Box 1259	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ ☐ Disputed	
Oaks PA 19456		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community debt	Fee Simple	
Is the claim subject to offset?  ✓ No		
Yes		
4.7		\$23.66
Baylor Scott & White Nonpriority Creditor's Name	Last 4 digits of account number1182_	
P.O. Box 1259	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	— ☐ Disputed	
Oaks         PA         19456           City         State         ZIP Code	— — — ( NONDRIORITY	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt		
Is the claim subject to offset?	ree Simple	
✓ No		
Yes		
4.8		*
	Local A Marko of account country and a second	\$1,254.83
Baylor Scott & White Health Nonpriority Creditor's Name	Last 4 digits of account number 7 7 0 5	
P.O. Box 674350	When was the debt incurred? 1/5/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
Delles TV 75267 4250	Disputed	
Dallas         TX         75267-4350           City         State         ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	. 33 Simple	
✓ No		
Yes		

Debtor 1 Joe Eugene Uvalle Debtor 2 **Tina Lynn Uvalle** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the **Total claim** previous page. 4.9 \$77.00 **Capital Accounts** Last 4 digits of account number <u>6</u> <u>5</u> <u>9</u> <u>0</u> Nonpriority Creditor's Name When was the debt incurred? 04/27/2017 Attn: Bankruptcy Dept As of the date you file, the claim is: Check all that apply. Number PO Box 140065 ☐ Contingent Unliquidated ☐ Disputed **Nashville** TN 37214 State ZIP Code City Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Unknown Loan Type** Is the claim subject to offset? **☑** No Yes 4.10 \$2,509.00 Last 4 digits of account number Capital One 7 6 5 4 Nonpriority Creditor's Name When was the debt incurred? 12/2016 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Number Street PO Box 30285 Contingent ☐ Unliquidated Disputed Salt Lake City UT 84130 City ZIP Code State Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt  $\overline{\mathbf{A}}$ **Credit Card** Is the claim subject to offset? ✓ No ☐ Yes 4.11 \$607.30 **Century Integrated Partners Inc** Last 4 digits of account number 4 5 2 Nonpriority Creditor's Name When was the debt incurred? 1/05/2019 P.O. Box 697 As of the date you file, the claim is: Check all that apply. Number Contingent Unliquidated Disputed **Tinley Park** IL 60477 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\square$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Collecting for -Is the claim subject to offset? **☑** No Yes 

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle	Case number (if known)	
Part 2: Your NONPRIORITY Unsec	ured Claims Continuation Page	
After listing any entries on this page, number the previous page.	After listing any entries on this page, number them sequentially from the previous page.	
4.12		\$269.02
Century Integrated Partners Inc	Last 4 digits of account number 9 0 4 9	
Nonpriority Creditor's Name P.O. Box 697	When was the debt incurred? 11/2018	
Number Street	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
Tinley Park IL 60477	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt Is the claim subject to offset?	Arrearage	
<b>☑</b> No		
Yes		
4.13		\$607.30
Century Integrated Partners Inc	Last 4 digits of account number 7 4 5 2	
Nonpriority Creditor's Name P.O. Box 697	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated Disputed	
Tinley Park IL 60477 City State ZIP Code	Time of NONDRIORITY unrecounted alsimo	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
lacktriangledown Check if this claim is for a community debt	Arrearage	
Is the claim subject to offset?		
✓ No  ✓ Yes		
4.14		****
Citibank/The Home Depot	Last 4 digits of account number 4 5 2 9	\$668.00
Nonpriority Creditor's Name	Last 4 digits of account number 4 5 2 9  When was the debt incurred? 06/2018	
Attn: Recovery/Centralized Bankruptcy Number Street	As of the date you file, the claim is: Check all that apply.	
PO Box 790034	Contingent	
	Unliquidated Disputed	
St Louis         MO         63179           City         State         ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
☐ Check if this claim is for a community debt	Charge Account	
Is the claim subject to offset?		
✓ No Yes		

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle	Case number (if known)	
Part 2: Your NONPRIORITY Uns	ecured Claims Continuation Page	
After listing any entries on this page, number previous page.	er them sequentially from the	Total claim
4.15		\$7,953.00
Connexus CU Nonpriority Creditor's Name	Last 4 digits of account number 4 2 5 5	
Attn: Bankruptcy	When was the debt incurred? 09/2018	
Number Street PO Box 8026	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent ☐ Unliquidated	
Wausau WI 54402	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community de	Check Credit or Line of Credit	
Is the claim subject to offset?  ☑ No ☐ Yes		
4.16		\$913.71
Credit Bureau Systems, Inc	Last 4 digits of account number 0 1 2 1	<u> </u>
Nonpriority Creditor's Name PO. Box 9200	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated Disputed	
Paducah KY 42002-92 City State ZIP Code	200	
City State ZIP Code Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce</li></ul>	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community de		
Is the claim subject to offset?	<b>3</b>	
✓ No Yes		
4.17		\$913.71
Credit Bureau Systems, Inc Nonpriority Creditor's Name	Last 4 digits of account number 0 1 2 1	
PO. Box 9200	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.  Contingent	
	Unliquidated	
Paducah KY 42002-92	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community de	ebt Arrearage	
Is the claim subject to offset?  No		
✓ No Yes		

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.18		\$1,254.83
Financial Corporation of America	Last 4 digits of account number	
Nonpriority Creditor's Name 12515 Research Blvd. Bldg. 2 Suite 100	When was the debt incurred? 1/5/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin         TX         78720-3500           City         State         ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
Check if this claim is for a community debt	Notice Only	
Is the claim subject to offset?	,	
<b>☑</b> No		
Yes		
4.19		\$366.03
Financial Corporation of America	Last 4 digits of account number 6 4 3 7	· · ·
Nonpriority Creditor's Name 12515 Research Blvd. Bldg. 2 Suite 100	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin TX 78720-3500		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Notice Only	
Is the claim subject to offset?	Notice Only	
✓ No		
Yes		
4.20		\$324.77
Financial Corporation of America	Last 4 digits of account number 5 5 9 9	
Nonpriority Creditor's Name	When was the debt incurred? 1/5/2019	
12515 Research Blvd. Bldg. 2 Suite 100   Number   Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin TX 78720-3500		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Notice Only	
Is the claim subject to offset?	Notice Offig	
✓ No		
Yes		

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number the previous page.	m sequentially from the	Total claim
4.21		\$384.79
Financial Corporation of America	Last 4 digits of account number 6 0 1 4	
Nonpriority Creditor's Name 12515 Research Blvd. Bldg. 2 Suite 100	When was the debt incurred? 1/17/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ ☐ Contingent ☐ Unliquidated	
	□ Disputed	
Austin         TX         78720-3500           City         State         ZIP Code	- Turns of MONDDIODITY are accounted a lating	
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only	Obligations arising out of a separation agreement or divorce	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify Notice Only	
Is the claim subject to offset?	Notice only	
✓ No		
Yes		
4.22		\$732.14
Financial Corporation of America	Last 4 digits of account number 6 4 5 7	<u>Ψ/32.14</u>
Nonpriority Creditor's Name	When was the debt incurred? 1/5/2019	
12515 Research Blvd. Bldg. 2 Suite 100 Number Street	As of the date you file, the claim is: Check all that apply.	
Number Street	_ ☐ Contingent	
	Unliquidated	
Austin TX 78720-3500	Disputed	
City State ZIP Code	Type of NONPRIORITY unsecured claim:	
Who incurred the debt? Check one.	☐ Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	✓ Other. Specify	
☐ Check if this claim is for a community debt	Notice Only	
Is the claim subject to offset?		
✓ No ☐ Yes		
4.23		\$29.31
Financial Corporation of America	_ Last 4 digits of account number _ 0 _ 1 _ 3 _ 1	
Nonpriority Creditor's Name 12515 Research Blvd. Bldg. 2 Suite 100	When was the debt incurred? 3/28/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin TX 78720-3500		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
— Object William to the commence the date	Other. Specify	
Is the claim subject to offset?	Notice Only	
No		
Yes		

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle	Case number (if known)	
Part 2: Your NONPRIORITY Unsecur	red Claims Continuation Page	
After listing any entries on this page, number their previous page.	m sequentially from the	Total claim
4.24		\$384.79
Financial Corporation of America	Last 4 digits of account number 6 0 1 4	
Nonpriority Creditor's Name 12515 Research Blvd. Bldg. 2 Suite 100	When was the debt incurred? 1/17/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin         TX         78720-3500           City         State         ZIP Code		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify  Notice Only	
Is the claim subject to offset?	,	
☑ No		
Yes		
4.25		\$30.00
Financial Corporation of America	Last 4 digits of account number 6 5 4 8	
Nonpriority Creditor's Name 12515 Research Blvd. Bldg. 2 Suite 100	When was the debt incurred? 3/25/2019	
Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin TX 78720-3500		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts	
Check if this claim is for a community debt	✓ Other. Specify  Notice Only	
Is the claim subject to offset?	Notice Offiy	
✓ No		
Yes		
4.26		\$36.74
Financial Corporation of America	Last 4 digits of account number 6 5 4 7	<del></del>
Nonpriority Creditor's Name	When was the debt incurred? 3/25/2019	
12515 Research Blvd. Bldg. 2 Suite 100 Number Street	As of the date you file, the claim is: Check all that apply.	
	_ Contingent	
	☐ Unliquidated ☐ Disputed	
Austin TX 78720-3500		
City State ZIP Code  Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
Debtor 1 only	Student loans Obligations arising out of a congration agreement or diverse	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
☐ Check if this claim is for a community debt Is the claim subject to offset?	Notice Only	
No		
Yes		

Debtor 1 Joe Eugene Uvalle Debtor 2 **Tina Lynn Uvalle** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.27 \$34.00 **Hatem Nour MDPA** Last 4 digits of account number 3 7 4 3 Nonpriority Creditor's Name When was the debt incurred? 5959 Gateway Blvd West Ste 120 Number As of the date you file, the claim is: Check all that apply. ☐ Contingent Unliquidated Disputed El Paso 79925-3315 TX City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt Arrearage Is the claim subject to offset? **☑** No Yes 4.28 \$686.00 Last 4 digits of account number LVNV Funding/Resurgent Capital 3 4 9 9 Nonpriority Creditor's Name When was the debt incurred? 08/2019 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Stree Number PO Box 10497 Contingent ☐ Unliquidated Disputed Greenville SC 29603 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt  $\overline{\mathbf{A}}$ **Factoring Company Account** Is the claim subject to offset? ✓ No ☐ Yes 4.29 \$880.00 Merchants & Professional Credit Bureau Last 4 digits of account number 5 5 1 9 Nonpriority Creditor's Name When was the debt incurred? 07/08/2013 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Number Street 5508 Parkcrest Dr Ste. 210 Contingent Unliquidated Disputed **Austin** TX 78731 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans □ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\square$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Unknown Loan Type** Is the claim subject to offset? **☑** No Yes 

Debtor 2 Joe Eugene Uvalle Tina Lynn Uvalle	Case number (if known)	
Part 2: Your NONPRIORITY U	Insecured Claims Continuation Page	
After listing any entries on this page, nun previous page.	nber them sequentially from the	Total claim
4.30		\$621.00
Star Loans Nonpriority Creditor's Name	Last 4 digits of account number 2 2 1 9	
	When was the debt incurred? 04/22/2011	
Number Street	As of the date you file, the claim is: Check all that apply.  Contingent	
	Unliquidated	
	Disputed	
City State ZIP Cod Who incurred the debt? Check one.	Type of North Cloth Cuiseculed Claim.	
Debtor 1 only	<ul> <li>Student loans</li> <li>Obligations arising out of a separation agreement or divorce</li> </ul>	
Debtor 2 only  Debtor 1 and Debtor 2 only	that you did not report as priority claims	
Debtor 1 and Debtor 2 only  At least one of the debtors and another	<ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>□ Other. Specify</li> </ul>	
Check if this claim is for a community		
Is the claim subject to offset?		
✓ No Yes		
4.31		
Star Loans	Last 4 digits of account number 2 7 1 7	\$253.00
Nonpriority Creditor's Name	Last 4 digits of account number 2 7 1 7  When was the debt incurred? 07/03/2014	
Number Street	As of the date you file, the claim is: Check all that apply.	
	Contingent	
	Unliquidated Disputed	
City State ZIP Cod		
Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:  Student loans	
Debtor 1 only Debtor 2 only	Obligations arising out of a separation agreement or divorce	
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another	Other. Specify	
Check if this claim is for a community	y debt Secured	
Is the claim subject to offset?  ✓ No		
Yes		
4.32		\$1,098.00
Syncb/hhgreg	Last 4 digits of account number 7 8 9 5	
Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 05/2017	
Number Street PO Box 965060	As of the date you file, the claim is: Check all that apply.	
FO BOX 903000	Contingent  Unliquidated	
Orlando FL 32896	Disputed	
City State ZIP Cod		
Who incurred the debt? Check one.  Debtor 1 only	Student loans	
Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debtor 1 and Debtor 2 only	Debts to pension or profit-sharing plans, and other similar debts	
At least one of the debtors and another  Check if this claim is for a community	Other. Specify	
Check if this claim is for a community ls the claim subject to offset?	y debt Charge Account	
✓ No		
Yes		

Debtor 1 Joe Eugene Uvalle Debtor 2 **Tina Lynn Uvalle** Case number (if known) Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page After listing any entries on this page, number them sequentially from the Total claim previous page. 4.33 \$816.00 Syncb/hhgreg Last 4 digits of account number <u>5 8 1 5</u> Nonpriority Creditor's Name When was the debt incurred? 05/2017 Attn: Bankruptcy Number As of the date you file, the claim is: Check all that apply. PO Box 965060 ☐ Contingent Unliquidated ☐ Disputed 32896 Orlando FL City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Charge Account** Is the claim subject to offset? **☑** No Yes 4.34 \$681.00 Last 4 digits of account number Synchrony Bank/ JC Penneys 4 6 1 2 Nonpriority Creditor's Name When was the debt incurred? 06/2018 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Number Street PO Box 956060 Contingent ☐ Unliquidated Disputed Orlando FL 32896 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\overline{\mathbf{M}}$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt  $\overline{\mathbf{A}}$ **Charge Account** Is the claim subject to offset? **☑** No ☐ Yes 4.35 \$1,332.00 Synchrony Bank/Amazon Last 4 digits of account number 6 6 9 Nonpriority Creditor's Name When was the debt incurred? 08/2017 Attn: Bankruptcy As of the date you file, the claim is: Check all that apply. Number Street PO Box 965060 Contingent Unliquidated Disputed Orlando FL 32896 City State ZIP Code Type of NONPRIORITY unsecured claim: Who incurred the debt? Check one. ☐ Student loans ☐ Debtor 1 only Obligations arising out of a separation agreement or divorce Debtor 2 only that you did not report as priority claims Debtor 1 and Debtor 2 only  $\square$ Debts to pension or profit-sharing plans, and other similar debts At least one of the debtors and another Other. Specify Check if this claim is for a community debt **Charge Account** Is the claim subject to offset? **☑** No Yes 

Debtor 1	Joe Eugene Uvalle
Debtor 2	Tina Lynn Uvalle

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a. <b>\$0.00</b>
	6b.	Taxes and certain other debts you owe the government	6b. <b>\$1,700.00</b>
	6c.	Claims for death or personal injury while you were intoxicated	6c. <b>\$0.00</b>
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. <b>+\$0.00</b>
	6e.	<b>Total.</b> Add lines 6a through 6d.	6d. <b>\$1,700.00</b>
			Total claim
Total claims from Part 2	6f.	Student loans	6f. <b>\$0.00</b>
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <b>\$0.00</b>
	6h. Debts to pension or profit-sharing plans, and other similar debts		6h. <b>\$0.00</b>
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	<sup>6i.</sup> +\$29,933.49
	6j.	<b>Total.</b> Add lines 6f through 6i.	6j. <b>\$29,933.49</b>

Fill in this in	formation to ide				
Debtor 1	Joe	Eugene	Uvalle		
	First Name	Middle Name	Last Name		
Debtor 2	Tina	Lynn	Uvalle		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the				
Case number (if known)				Check if this amended filing	

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B*: *Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Fill in this inf	ormation to id	dentify your case	:				
Debtor 1	Joe	Eugene	Uvalle	_			
	First Name	Middle Name	Last Name				
Debtor 2	Tina	Lynn	Uvalle				
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS							
Case number					☐ Check if this		
(if known)					amended fili		

#### Official Form 106H

#### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1.	Doy ☑ □	<b>ou h</b> No Yes	ave any codebtors?	(If you are filing a	joint case, c	lo not list eith	er spouse a	as a codebtor.)			
2.		Within the last 8 years, have you lived in a community property state or territory? (Community property states and include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)  No. Go to line 3.									
	닐		Did your spouse, form	ner enguee or lega	Leguivalent	live with you	at the time?	2			
	$\overline{\mathbf{A}}$	169	No	iei spouse, oi iega	i equivalent	iive wiiii you	at the time:				
		닐									
			Yes			_					
			In which community st	ate or territory did y	you live? _	Texas	Fill i	in the name and current address of that person.			
			Tina Lynn Uvalle								
			Name of your spouse, form 133 E. Bluebriar Dr	, ,	quivalent						
			Number Street	•							
			Granite Shoals		TX	78654					
			City		State	ZIP Code					

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

	nation to	identify your case:						
Debtor 1	Joe	Eugene	Uvalle					
	First Name	Middle Name	Last Name		Che	ck if this is:		
Debtor 2	Tina	Lynn	Uvalle		_	An amended filing		
(Spouse, if filing)	First Name	Middle Name	Last Name			A supplement showing	a postpe	tition
United States Bank	ruptcy Court	for the: WESTERN D	ISTRICT OF TEX	CAS		chapter 13 income as		
Case number (if known)						MM / DD / YYYY		
Official Form 10	)6I					(VIIVI / DD / 1111		
Schedule I: Yo	ur Inco	me						12/1
nclude information a bout your spouse. It our name and case i	bout your s f more spac	et information. If you are pouse. If you are separ to is needed, attach a se trown). Answer every quoyment	ated and your spo parate sheet to thi	use is not fi	ling with y	ou, do not include inf	ormatio	1
. Fill in your emplo	oyment		Debtor 1			Debtor 2 or non-fili	na snou	SA
If you have more		F					ng spou	<u> </u>
job, attach a sepa with information a		Employment status	<ul><li>✓ Employed</li><li>✓ Not employed</li></ul>	ed		<ul><li>✓ Employed</li><li>✓ Not employed</li></ul>		
additional employ		Occupation	Dept. Manager			Housekeeping		
Include part-time,	seasonal	Occupation	Dept. Manager			liousekeeping		
or self-employed		Employer's name	HEB			Wyndham Marble	Falls	
Occupation may in	nclude	Employer's address	1503 Hwy. 143	1 W		755 Rocky Rd.		
student or homem applies.	naker, if it	, ,,	Number Street			Number Street		
			Marble Falls	TV	70651	Marble Falls	TV	79654
			Marble Falls City	TX State	<b>78654</b> Zip Code	Marble Falls City	<b>TX</b> State	<b>78654</b> Zip Code
		How long employed th	City	State		City		
		How long employed th	City nere? 24 years	State				
Part 2: Give I	Details Ab	How long employed the	City nere? 24 years	State		City		
Stimate monthly inc	ome as of th	oout Monthly Incom	City nere? 24 years	State S	Zip Code	City 1 month	State	Zip Code
Estimate monthly incomon-filing spouse unlessify you or your non-filing	ome as of the second of the se	oout Monthly Incom	City  here? 24 years  e  n. If you have nothing	State  S  ing to report	Zip Code - for any line	City  1 month  write \$0 in the space.	State	Zip Code  your
Estimate monthly incon-filing spouse unless	ome as of the second of the se	he date you file this form eparated.	City  here? 24 years  e  n. If you have nothing	State  S  ing to report	Zip Code - for any line	City  1 month  write \$0 in the space.	State Include	Zip Code — your
Estimate monthly inco on-filing spouse unless you or your non-filing ou need more space,	ome as of the service	he date you file this form eparated.	City  nere? 24 years  e  n. If you have nothiner, combine the info	State  S  ing to report  primation for a	Zip Code  for any line	City  1 month  write \$0 in the space.  Its for that person on the	State Include	Zip Code  your
Estimate monthly inco on-filing spouse unless you or your non-filing ou need more space,	ome as of the service	the date you file this form eparated. We more than one employed parate sheet to this form.  The date you file this form exparated.  We more than one employed parate sheet to this form.	City  nere? 24 years  e  n. If you have nothiner, combine the info	State  S  ing to report  primation for a	Zip Code  for any line  all employer	City  1 month  write \$0 in the space.  Is for that person on the For Debtor 2 or non-filing spouse	State Include	Zip Code  your

Case number (if known) \_

		F	or Debtor 1	For Debto		
	Copy line 4 here	4.	\$3,926.00		53.33	-
5.	List all payroll deductions:					
	5a. Tax, Medicare, and Social Security deductions	5a.	\$326.78	\$2	59.05	
	5b. Mandatory contributions for retirement plans	5b.	\$0.00		\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	\$193.79		\$0.00	
	5d. Required repayments of retirement fund loans	5d.	\$0.00		\$0.00	
	5e. Insurance	5e.	\$521.86		\$0.00	
	5f. Domestic support obligations	5f.	\$0.00	\$19	93.00	
	5g. Union dues	5g.	\$0.00		<u>\$0.00</u>	
	5h. Other deductions. Specify: See continuation sheet	5h. <b>+</b>	\$354.82		\$0.00	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$ .	6.	\$1,397.25	\$4	<u>52.05</u>	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$2,528.75	\$1,80	01.28	
8.	List all other income regularly received:					
	8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		\$0.00	
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b. Interest and dividends	8b.	\$0.00	;	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00	\$20	69.95	
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d. Unemployment compensation	8d.	\$0.00		\$0.00	
	8e. Social Security	8e.	\$0.00		\$0.00	
	8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		•		•	
	Specify:	_ 8f.	\$0.00		\$0.00	
	8g. Pension or retirement income	8g.	\$0.00		<u>\$0.00</u>	
	8h. Other monthly income.  Specify:	_ 8h. <b>+</b> _	\$0.00		\$0.00	
9.	<b>Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	\$2	69.95	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$2,528.75	+\$2,0	71.23	\$4,599.98
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.						PF
	Do not include any amounts already included in lines 2-10 or amounts the	at are not	t available to pay e	expenses list	ed in Sche	edule J.
	Specify:				. 11. <b>+</b>	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11 income. Write that amount on the Summary of Your Assets and Liabilities				12.	\$4,599.98 Combined
13	if it applies.  Do you expect an increase or decrease within the year after you file	this form	1?			monthly income
	No. None.		<del></del>			
	Yes. Explain:					

Debtor 1	Joe Eugene Uvalle
Debtor 2	Tina Lynn Uvalle

Case number (if known)

5h.	Other Payroll Deductions (details)		For Debtor 1	For Debtor 2 or non-filing spouse
	Healthcare account		\$220.83	
	Life insurance self and family		\$61.66	
	United Way		\$21.67	
	Volunteer Plan		\$21.93	
	Partner Life		\$15.04	
	Child Life		\$1.30	
	Spouse Life		\$6.89	
	Basic Life		\$5.50	
		Totals:	\$354.82	\$0.00

F	ill in this inform	nation to identi	fy your case:			Choc	k if this is:	
	Debtor 1	Joe	Eugene	Uvalle	e		An amended filing	
		First Name	Middle Name	Last Na			A supplement showin	g postpetition
	Debtor 2	Tina	Lynn	Uvalle		1	chapter 13 expenses following date:	as of the
	(Spouse, if filing)	First Name	Middle Name	Last Na	ame	'	following date.	
	United States Bankr	ruptcy Court for the	: WESTERN DIST	RICT OF	TEXAS	Ī	MM / DD / YYYY	<del></del>
	Case number (if known)							
0	fficial Form 10	<u>16J</u>				•		
S	chedule J: Yo	ur Expense	es .					12/15
nai	rrect information. If me and case number	f more space is ne	eeded, attach anothe wer every question.	-	ing together, both ar this form. On the top	-		
1.	Is this a joint cas	e?						
	No. Go to lin Yes. Does D  No Yes. Toes D  Yes	e 2.  ebtor 2 live in a s  s. Debtor 2 must fi	eparate household?	2, Expense:	s for Separate Housel	nold of [	Debtor 2.	
2.	Do you have depo		No Yes. Fill out this info	ormation	Dependent's relation		to Dependent's	
	Do not list Debtor Debtor 2.	1 and	for each dependent.		Debtor 1 or Debtor	2	<u>age</u> 17	live with you? ☐ No
	Do not state the de	ependents'			Son		11	— ☑ Yes
	names.	,			Daughter		16	─
					Nephew		16	─ No ─ ☑ Yes
					Daughter		16	□ No □ ☑ Yes
					Son		10	□ No □ ☑ Yes
3.	Do your expenses expenses of peop yourself and you	ole other than	☑ No □ Yes					
F	Part 2: Estima	ate Your Ongo	ing Monthly Expe	enses				
to		of a date after the			re using this form as supplemental Sche			
			h government assist n Schedule I: Your In	-			Your exper	ıses
4.			enses for your reside any rent for the groun				4	\$640.00
	If not included in	line 4:						
	4a. Real estate ta	axes					4a	
	4b. Property, hon	neowner's, or rente	r's insurance				4b	
	4c. Home mainte	nance, repair, and	upkeep expenses				4c	\$50.00
	4d. Homeowner's	association or cor	ndominium dues				4d.	

Case number (if known)

		Your expe	nses
5.	Additional mortgage payments for your residence, such as home equity loans	5	
6.	Utilities:		
	6a. Electricity, heat, natural gas	6a	\$250.00
	6b. Water, sewer, garbage collection	6b	\$150.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c	\$195.00
	6d. Other. Specify:	6d.	
7.	Food and housekeeping supplies	7.	\$1,200.00
8.	Childcare and children's education costs	8.	
9.	Clothing, laundry, and dry cleaning	9.	\$300.00
10.	Personal care products and services	10.	\$110.00
11.	Medical and dental expenses	11.	\$335.00
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$275.00
13.		13.	\$100.00
14.	Charitable contributions and religious donations	14.	
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a	
	15b. Health insurance	15b	
	15c. Vehicle insurance	15c	\$60.00
	15d. Other insurance. Specify:	15d.	
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 Ford Taurus	17a	\$301.00
	17b. Car payments for Vehicle 2 <b>Jeep Patriot</b>	17b.	\$448.00
	17c. Other. Specify:	17c	
	17d. Other. Specify:	17d	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	
19.	Other payments you make to support others who do not live with you.  Specify:	19.	

		Joe Eugene Uvalle Tina Lynn Uvalle	Case number (if known)					
		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.						
	20a.	Mortgages on other property	20a					
	20b.	Real estate taxes	20b					
	20c.	Property, homeowner's, or renter's insurance	20c					
	20d.	Maintenance, repair, and upkeep expenses	20d	\$20.00				
	20e.	Homeowner's association or condominium dues	20e					
21.	Othe	r. Specify:	21. +					
22.	Calcu	late your monthly expenses.						
	22a.	Add lines 4 through 21.	22a	\$4,434.00				
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b					
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c	\$4,434.00				
23.	Calcu	ulate your monthly net income.						
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a	\$4,599.98				
	23b.	Copy your monthly expenses from line 22c above.	23b. <b>_</b>	\$4,434.00				
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c	\$165.98				
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you	file this form?					
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?							
		No. Yes. Explain here: None.						

Debtor 1	Joe	Eugene	Uvalle	_	
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	Tina First Name	Lynn Middle Name	Uvalle Last Name	-	
. , , , , ,					
United States Ba	nkruptcy Court fo	or the: WESTERN DI	STRICT OF TEXAS	-	
Case number (if known)				<u> </u>	ck if this is an nded filing
Official Form	106Sum				
Summary of	Your Ass	ets and Liabilit	ties and Certain Sta	tistical Information	12/1
Part 1: Su	mmarize You	ır Assets			
					Your assets
					Value of what you own
Schedule A/B	: Property (Offici	al Form 106A/B)			Value of what you own
	, , ,	,	VB		Value of what you own \$90,040.00
1a. Copy line	e 55, Total real e	state, from Schedule A	v/B		\$90,040.00
<ul><li>1a. Copy line</li><li>1b. Copy line</li></ul>	e 55, Total real e	state, from Schedule A			\$90,040.00
<ul><li>1a. Copy line</li><li>1b. Copy line</li><li>1c. Copy line</li></ul>	e 55, Total real e	state, from Schedule A nal property, from Sche	edule A/B		\$90,040.00
<ul><li>1a. Copy line</li><li>1b. Copy line</li><li>1c. Copy line</li></ul>	e 55, Total real e	state, from Schedule A nal property, from Sche	edule A/B		\$90,040.00
1a. Copy line 1b. Copy line 1c. Copy line Part 2: Su	e 55, Total real ed e 62, Total person e 63, Total of all p mmarize You	state, from Schedule A nal property, from Sche property on Schedule A ur Liabilities ave Claims Secured by	edule A/B		\$90,040.00 \$100,422.19 \$190,462.19 Your liabilities Amount you owe
1a. Copy line 1b. Copy line 1c. Copy line Part 2: Su  Schedule D: 0 2a. Copy the Schedule E/F	e 55, Total real ed 62, Total person ed 63, Total of all person ed 64, Tota	nal property, from Schedule A property on Sch	edule A/B A/B  A/B  A/Property (Official Form 106D)	st page of Part 1 of Schedule [	\$90,040.00 \$100,422.19 \$190,462.19 Your liabilities Amount you owe \$89,274.00
1a. Copy line  1b. Copy line  1c. Copy line  Part 2: Su  Schedule D: 0  2a. Copy the  3a. Copy the	e 55, Total real ed e 62, Total person e 63, Total of all person	nal property, from Scheon Schedule A property on Schedule A property	edule A/B  A/B  A/Property (Official Form 106D) of claim, at the bottom of the last as (Official Form 106E/F)	st page of Part 1 of Schedule [	\$90,040.00 \$100,422.10 \$190,462.10 Your liabilities Amount you owe \$89,274.00 \$1,700.00

## Part 3: Summarize Your Income and Expenses

	btor 1 btor 2	Joe Eugene Uvalle Tina Lynn Uvalle	Case number (if known)			
P	art 4:	Answer These Questions for Administrative and Statist	tical Records			
6.	Are yo	ou filing for bankruptcy under Chapters 7, 11, or 13?				
	ш	lo. You have nothing to report on this part of the form. Check this box and res	submit this form to the court with y	our other schedules.		
7.	What	kind of debt do you have?				
	ت ا	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.				
		<b>Tour debts are not primarily consumer debts.</b> You have nothing to report nis form to the court with your other schedules.	on this part of the form. Check th	is box and submit		
8.		the <b>Statement of Your Current Monthly Income:</b> Copy your total current of Form 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14	•	\$3,708.25		
9.	Сору	the following special categories of claims from Part 4, line 6 of Schedu	ıle E/F:			
			Total claim			
	From	Part 4 on Schedule E/F, copy the following:				
	9a. D	comestic support obligations. (Copy line 6a.)	\$0.	00		

From Fart 4 on Schedule Lift, copy the following.	
9a. Domestic support obligations. (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$1,700.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$1,700.00

Fill in this info	ormation to i			
Debtor 1	Joe	Eugene	Uvalle	
	First Name	Middle Name	Last Name	
Debtor 2	Tina	Lynn	Uvalle	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court fo			
Case number				☐ Check if this i
(if known)				amended filin

## Official Form 106Dec

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who	o is NOT an attorney to help you fill out bankruptcy forms?
<b>☑</b> No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I hat true and correct.	ave read the summary and schedules filed with this declaration and that they are
X /s/ Joe Eugene Uvalle Joe Eugene Uvalle, Debtor 1	X /s/ Tina Lynn Uvalle Tina Lynn Uvalle, Debtor 2
Date <u>11/21/2019</u> MM / DD / YYYY	Date <u>11/21/2019</u> MM / DD / YYYY

Debtor 1	Joe First Name	Eugene Middle Name	Uvalle Last Name		
Debtor 2 (Spouse, if fil	Tina ing) First Name	Lynn Middle Name	Uvalle Last Name		
	0,	or the: WESTERN DIS			
Case number (if known)	·			☐ Check if this is an amended filing	
Official Fo	rm 107			_	
Statemen	t of Financia	Affairs for Ind	lividuals Filing for I	Bankruptcy	04/19
correct inform your name an	nation. If more space d case number (if k	e is needed, attach a nown). Answer every	separate sheet to this form.	both are equally responsible for supplying On the top of any additional pages, write  ived Before	
Part 1:					
. What is y	our current marital ed arried	status?			
. What is y Marrie Not m . During th	ed narried e last 3 years, have	you lived anywhere c	other than where you live no		

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas,

✓ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Washington, and Wisconsin.)

Debtor 1 Joe Eugene Uvalle Debtor 2 Tina Lynn Uvalle				Case nur	mber (if known)	
Р	art 2:	Explain the Sources of	Your Income			
4.	Did you Fill in th	u have any income from employ ne total amount of income you rec re filing a joint case and you have	ment or from operating a beived from all jobs and all bu	isinesses, including par	t-time activities.	alendar years?
	□ No ☑ Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions	Sources of income Check all that apply.	Gross income (before deductions and exclusions
		ry 1 of the current year until ı filed for bankruptcy:	Wages, commissions, bonuses, tips	\$49,449.58	₩ Wages, commissions, bonuses, tips	\$2,725.00
			Operating a business		Operating a business	
		calendar year:	✓ Wages, commissions, bonuses, tips	\$47,099.13	₩ Wages, commissions, bonuses, tips	\$8,085.93
(Jai	nuary 1 to	December 31, 2018 ) YYYY	Operating a business		Operating a business	
For	the cale	ndar year before that:	₩ages, commissions, bonuses, tips	\$46,352.60	₩ Wages, commissions, bonuses, tips	\$6,277.21
(January 1 to December 31,)		December 31, 2017 )	Operating a business		Operating a business	
5.	Include unempl	a receive any other income duri- income regardless of whether that oyment; and other public benefit publing and lottery winnings. If you 1.	at income is taxable. Examp payments; pensions; rental ir	les of other income are ncome; interest; dividen	ds; money collected from la	awsuits; royalties;
	List eac	ch source and the gross income fr	om each source separately.	Do not include income	that you listed in line 4.	
	□ No ☑ Yes	s. Fill in the details.				
			Debtor 1		Debtor 2	
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions	Sources of income Describe below.	Gross income from each source (before deductions and exclusions
		ry 1 of the current year until			Child support	\$739.47
	,					
		calendar year: December 31, 2018 )			Child support	\$3,178.95
		ndar year before that:			Child support	\$6,131.91
(Jai	nuary 1 to	December 31, 2017 )				<del></del>

		Joe Eugene Uvalle Tina Lynn Uvalle  Case number (if known)				
P	art 3:	List Certain Payments You Ma	ide Before Y	ou Filed for Ba	nkruntcv	
6		er Debtor 1's or Debtor 2's debts prima			- парто <u>у</u>	
٥.		•			mar dabta ara dafina	od in 11 I I C C & 101(9) on
	□ No.	Neither Debtor 1 nor Debtor 2 has por "incurred by an individual primarily for	-			:u III 11 0.3.0. 9 101(o) as
		During the 90 days before you filed for	bankruptcy, did	l you pay any credit	or a total of \$6,825*	or more?
		No. Go to line 7.				
		Yes. List below each creditor to whe total amount you paid that credit child support and alimony. A	editor. Do not in	clude payments for	domestic support of	obligations, such as
		* Subject to adjustment on 4/01/22 and	d every 3 years	after that for cases	filed on or after the	date of adjustment.
	✓ Yes	. Debtor 1 or Debtor 2 or both have pr	imarily consun	ner debts.		
		During the 90 days before you filed for	bankruptcy, did	I you pay any credit	or a total of \$600 or	more?
		☐ No. Go to line 7.				
		Yes. List below each creditor to who creditor. Do not include payment Also, do not include payment	nents for domes	tic support obligation	ons, such as child su	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
	Cooper		_	\$1,425.00		Mortgage
		ess Waters Blvd	10/1/2019			☐ Car ☐ Credit card
Num			- 9/1/2019 8/1/2019			Loan repayment
			-			☐ Suppliers or vendors
Co <sub>l</sub>	opel	<b>TX 75019</b> State ZIP Code	_			Other
7.	Insiders corporate agent, ir such as  No Yes  Within 1 benefite	I year before you filed for bankruptcy, a include your relatives; any general partnitions of which you are an officer, director, including one for a business you operate a child support and alimony.  List all payments to an insider.  I year before you filed for bankruptcy, and an insider?  payments on debts guaranteed or cosignate.	ers; relatives of person in contro s a sole proprie	any general partner ol, or owner of 20% tor. 11 U.S.C. § 10	rs; partnerships of w or more of their voti 1. Include payment	which you are a general partner; ing securities; and any managing is for domestic support obligations
	✓ No ☐ Yes	. List all payments that benefited an insid	ler.			

	otor 1 otor 2	Joe Eugene Uvalle Tina Lynn Uvalle		Case number (if known)				
P	art 4:	Identify Legal Actions, Repos	ssessions, and Foreclosur	es				
€.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.							
	☑ No □ Yes	No Yes. Fill in the details.						
10.	seized,	1 year before you filed for bankruptcy, or levied? all that apply and fill in the details below.	, was any of your property repo	ssessed, foreclosed, garnished, a	ittached,			
		Go to line 11. s. Fill in the information below.						
			Describe the property	Date	Value of the property			
	. Bank litor's Nam	ρ	2017 Chevy Cruze	9/8/2019	\$12,000.00			
Num	iber Str	eet	Explain what happened Property was repossesse Property was foreclosed.	d.				
			Property was garnished.	singal culturied				
City		State ZIP Code	Property was attached, se					
11.		90 days before you filed for bankrupto ts from your accounts or refuse to ma			ff any			
	☐ Yes	s. Fill in the details.						
12.		1 year before you filed for bankruptcy, rs, a court-appointed receiver, a custo		e possession of an assignee for tl	ne benefit of			
	✓ No ☐ Yes	3						
P	art 5:	List Certain Gifts and Contrib	outions					
13.	Within	2 years before you filed for bankrupto	y, did you give any gifts with a t	otal value of more than \$600 per p	person?			
	✓ No ☐ Yes	s. Fill in the details for each gift.						
14.		2 years before you filed for bankruptc charity?	y, did you give any gifts or cont	ributions with a total value of mor	e than \$600			
	✓ No	s. Fill in the details for each gift or contril	bution.					

Debtor 1 Debtor 2		Joe Eugen Tina Lynn			Case numb	oer (if kno	own)	
Р	art 6:	List Cer	tain L	osses		·	,	
	Within		e you fi	iled for bankru	ptcy or since you filed for bankruptcy, did you lo	se anyth	ning because of th	neft, fire,
	☑ No □ Yes	s. Fill in the d	letails.					
Р	art 7:	List Cer	tain P	ayments or	Transfers			
16.	Include  No	you consult	ted abo	out seeking ba	Iptcy, did you or anyone else acting on your behankruptcy or preparing a bankruptcy petition? preparers, or credit counseling agencies for services			
H. I	Bryan H	licks Vas Paid			Description and value of any property transferr	red	Date payment or transfer was made	Amount of payment
	l 2nd St				_		11/21/2019	\$1,800.00
Ma City	rble Fal	ls	TX State	<b>78654</b> ZIP Code				
Ema	ail or websit	te address			_			
Person Who Made the Payment, if Not You  MoneySharp Person Who Was Paid		i You	Description and value of any property transferr	red	Date payment or transfer was made	Amount of payment		
Num	nber Str	reet			_		9/20/2019	\$10.00
City			State	ZIP Code	_			
Ema	ail or websit	te address			_			
Pers	on Who M	Made the Payme	nt, if Not	You	_			

	tor 1 tor 2	Joe Eugene Uvalle Tina Lynn Uvalle	Case number (if known)
17.	anyone	1 year before you filed for bankruptcy, did you or anyone else acting who promised to help you deal with your creditors or to make payinclude any payment or transfer that you listed on line 16.	
	✓ No	s. Fill in the details.	
18.		2 years before you filed for bankruptcy, did you sell, trade, or other ty transferred in the ordinary course of your business or financial at	
		both outright transfers and transfers made as security (such as granting include gifts and transfers that you have already listed on this statement	
	✓ No	s. Fill in the details.	
19.		10 years before you filed for bankruptcy, did you transfer any prope a beneficiary? (These are often called asset-protection devices.)	rty to a self-settled trust or similar device of which
	✓ No ☐ Yes	s. Fill in the details.	
Pa	art 8:	List Certain Financial Accounts, Instruments, Safe De	eposit Boxes, and Storage Units
20.		1 year before you filed for bankruptcy, were any financial accounts , closed, sold, moved, or transferred?	or instruments held in your name, or for your
		checking, savings, money market, or other financial accounts; certificat, pension funds, cooperatives, associations, and other financial institution	•
	✓ No ☐ Yes	s. Fill in the details.	
21.	-	now have, or did you have within 1 year before you filed for bankruurities, cash, or other valuables?	ptcy, any safe deposit box or other depository
	✓ No	s. Fill in the details.	
22.	Have yo	ou stored property in a storage unit or place other than your home w	vithin 1 year before you filed for bankruptcy?
		s. Fill in the details.	
Pa	art 9:	Identify Property You Hold or Control for Someone E	lse
23.	•	hold or control any property that someone else owns? Include any in trust for someone.	property you borrowed from, are storing for,
	✓ No ☐ Yes	s. Fill in the details.	

	otor 1 otor 2	Joe Eugene Uvalle Tina Lynn Uvalle	Case number (if known)
P	art 10:		
		rpose of Part 10, the following definitions apply:	
			uning wallistian agestomination valorace of
	hazardoι	nmental law means any federal, state, or local statute or regulation concer ous or toxic substance, wastes, or material into the air, land, soil, surface ng statutes or regulations controlling the cleanup of these substances, wa	water, groundwater, or other medium,
		eans any location, facility, or property as defined under any environmenta t or used to own, operate, or utilize it, including disposal sites.	I law, whether you now own, operate, or
		ous material means anything an environmental law defines as a hazardounce, hazardous material, pollutant, contaminant, or similar item.	is waste, hazardous substance, toxic
Rep	oort all no	notices, releases, and proceedings that you know about, regardless of wh	nen they occurred.
24.	Has any law?	ny governmental unit notified you that you may be liable or potentially lial	ole under or in violation of an environmental
	✓ No ☐ Yes	o es. Fill in the details.	
25.	-	you notified any governmental unit of any release of hazardous material?	
	✓ No ☐ Yes	es. Fill in the details.	
26.	Have you	you been a party in any judicial or administrative proceeding under any e	nvironmental law? Include settlements and
	✓ No ☐ Yes	o es. Fill in the details.	
Р	art 11:	Give Details About Your Business or Connections to Any	Business
27.	Within 4	n 4 years before you filed for bankruptcy, did you own a business or have ess?	any of the following connections to any
		A sole proprietor or self-employed in a trade, profession, or other activity, e  A member of a limited liability company (LLC) or limited liability partnership  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation	
	لظا	<ul><li>o. None of the above applies. Go to Part 12.</li><li>es. Check all that apply above and fill in the details below for each business.</li></ul>	
28.		n 2 years before you filed for bankruptcy, did you give a financial statement ancial institutions, creditors, or other parties.	nt to anyone about your business? Include
	□ No □ Yes	os. Fill in the details below.	

Debtor 1 Joe Eugene Uvalle	
Debtor 2 Tina Lynn Uvalle	Case number (if known)
Part 12: Sign Below	
that answers are true and correct. I up	ment of Financial Affairs and any attachments, and I declare under penalty of perjury nderstand that making a false statement, concealing property, or obtaining money or a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, and 3571.
X /s/ Joe Eugene Uvalle Joe Eugene Uvalle, Debtor 1 Date	X /s/ Tina Lynn Uvalle Tina Lynn Uvalle, Debtor 2 Date 11/21/2019
Did you attach additional pages to You	ur Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
☑ No □ Yes	
Did you pay or agree to pay someone	who is not an attorney to help you fill out bankruptcy forms?
<b>☑</b> No	
Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice,
	Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:				
Debtor 1	Joe	Eugene	Uvalle	
	First Name	Middle Name	Last Name	
Debtor 2	Tina	Lynn	Uvalle	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the: WESTERN DISTRICT OF TEXAS				
Case number				
(if known)				

#### Official Form 108

## Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Hold Secured Claims

	Identify the creditor and the property that is collateral	What do you intend to do with the	Did you claim the property
•	fill in the information below.	reditors who fiold claims secured by Fre	operty (Official Form 1000),
	For any creditors that you listed in Part 1 of Schedule D: C	reditors Who Hold Claims Secured by Pro	onerty (Official Form 106D)

Identify the creditor and the property that is collateral			What do you intend to do with the roperty that secures a debt?  Did you claim to as exempt on S		
Creditor's name:	Benny Boyd Marble Falls		Surrender the property. Retain the property and redeem it.		No Yes
Description of property	2015 Jeep Patriot	$   \overline{\mathbf{V}} $	Retain the property and enter into a Reaffirmation Agreement.		
securing debt:			Retain the property and [explain]:		
Creditor's name:	Mr. Cooper		Surrender the property. Retain the property and redeem it.		No Yes
Description of	133 E. Bluebriar Dr., Granite Shoals, TX	$\overline{\mathbf{V}}$	Retain the property and enter into a Reaffirmation Agreement.		
property securing debt:	78654		Retain the property and [explain]:		
Creditor's	OneMain Financial		Surrender the property.		No
name:			Retain the property and redeem it.		Yes
Description of property	2008 Ford Taurus	$   \overline{\mathbf{V}} $	Retain the property and enter into a Reaffirmation Agreement.		
securing debt:			Retain the property and [explain]:		

Debtor 1 Debtor 2	Joe Eugene Uvalle Tina Lynn Uvalle	Case number (if known)		
Identify	y the creditor and the property that is collate	eral What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Credito name:	r's TD Auto Finance	<ul><li>Surrender the property.</li><li>Retain the property and redeem it.</li></ul>	□ No □ Yes	
Descrip propert securin	у	<ul><li>Retain the property and enter into a Reaffirmation Agreement.</li><li>Retain the property and [explain]:</li></ul>		
Part 2:	List Your Unexpired Personal Pro	pperty Leases		
fill in the in	formation below. Do not list real estate leas	ed in Schedule G: Executory Contracts and Unexpires. Unexpired leases are leases that are still in effect operty lease if the trustee does not assume it. 11 U.S.	ct; the lease period has not	
	be your unexpired personal property leases		Will this lease be assumed?	
None.				
Part 3:	Sign Below			
•	enalty of perjury, I declare that I have indica I property that is subject to an unexpired lea	ted my intention about any property of my estate tha	at secures a debt and	
	Eugene Uvalle X ene Uvalle, Debtor 1	/s/ Tina Lynn Uvalle Tina Lynn Uvalle, Debtor 2		
_	1/21/2019 M / DD / YYYY	Date 11/21/2019 MM / DD / YYYY		

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

In re Joe Eugene Uvalle
Tina Lynn Uvalle

Case No.				
Chapter	7			

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:		
	For legal services, I have agreed to accept		
	Prior to the filing of this statement I have received		
	Balance Due		
2.	The source of the compensation paid to me was:  ☐ Debtor ☐ Other (specify)		
3.	The source of compensation to be paid to me is:		
	☑ Debtor ☐ Other (specify)		
4.	☑ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.		
	☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:		
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;		
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;		

c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030	(Form	2030)	(12/15)
02030 1	LEOIIII	20301	112/13

s/ Joe Eugene Uvalle	/s/ Tina Lynn Uvalle	a
	Phone: (830) 693-2165	
	Marble Falls, Texas 78654	
	901 2nd St.	
Date	<i>H. Bryan Hick</i> s H. Bryan Hicks	Bar No. 09576400
11/21/2019	/s/ H. Bryan Hicks	D. N. 00570100
presentation of the debtor(s) in this ba		
I certify that the foregoing is a comple	ete statement of any agreement or arrangeme	ent for payment to me for
	CERTIFICATION	
agreement with the debtor(s), the ab	ove-disclosed fee does not include the follow	ing services:

# UNITED STATES BANKRUPTCY COURT WESTERN DISTRICT OF TEXAS AUSTIN DIVISION

IN RE: Joe Eugene Uvalle Tina Lynn Uvalle

CASE NO

CHAPTER 7

## **VERIFICATION OF CREDITOR MATRIX**

know	knowledge.				
Date	11/21/2019	Signature	/s/ Joe Eugene Uvalle		
			Joe Eugene Uvalle		
Date	11/21/2019	Signature	/s/ Tina Lynn Uvalle		
		Ü	Tina Lynn Uvalle		

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her

Amex Correspondence/Bankruptcy PO Box 981540 El Paso, TX 79998

Attorney General/Child Support Division Attn: Bankruptcy PO Box 12017 Austin, TX 78711

Aurora Behavioral Health System P.O. Box 22248 Paducah, KY 40252-0248

Baylor Scott & White P.O. Box 1259 Oaks, PA 19456

Baylor Scott & White Health P.O. Box 674350 Dallas, TX 75267-4350

Benny Boyd Marble Falls 3407 US-281 Marble Falls, Texas 78654

Capital Accounts
Attn: Bankruptcy Dept
PO Box 140065
Nashville, TN 37214

Capital One Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130

Century Integrated Partners Inc P.O. Box 697 Tinley Park, IL 60477 Citibank/The Home Depot Attn: Recovery/Centralized Bankruptcy PO Box 790034 St Louis, MO 63179

Connexus CU Attn: Bankruptcy PO Box 8026 Wausau, WI 54402

Credit Bureau Systems, Inc PO. Box 9200 Paducah, KY 42002-9200

Financial Corporation of America 12515 Research Blvd. Bldg. 2 Suite 100 Austin, TX 78720-3500

Hatem Nour MDPA 5959 Gateway Blvd West Ste 120 El Paso, TX 79925-3315

LVNV Funding/Resurgent Capital Attn: Bankruptcy PO Box 10497 Greenville, SC 29603

Merchants & Professional Credit Bureau Attn: Bankruptcy 5508 Parkcrest Dr Ste. 210 Austin, TX 78731

Mr. Cooper Attn: Bankruptcy 8950 Cypress Waters Blvd Coppell, TX 75019

OneMain Financial Attn: Bankruptcy PO Box 3251 Evansville, IN 47731 Syncb/hhgreg Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

Synchrony Bank/ JC Penneys Attn: Bankruptcy PO Box 956060 Orlando, FL 32896

Synchrony Bank/Amazon Attn: Bankruptcy PO Box 965060 Orlando, FL 32896

TD Auto Finance Attn: Bankruptcy Dept PO Box 9223 Farmington Hills, MI 48333

Fill in this inf	ormation to	identify your case			box only as direc			
Debtor 1	Joe	Eugene	Uvalle	_   -				
	First Name	Middle Name	Last Name	1.There is	no presumption of abuse	Э.		
Debtor 2	Tina	Lynn Middle Nome	Uvalle		ulation to determine if a			
Spouse, if filing)	riist name	Middle Name	Last Name		applies will be made un est Calculation (Official			
Jnited States Ba	nkruptcy Court f	for the: WESTERN DIS	STRICT OF TEXAS		ns Test does not apply r			
Case number					ed military service but it			
if known)				later.	·			
				☐ Check if the	nis is an amended filing			
<i>((</i> :	1001 1			_				
fficial Form								
hapter 7 S	tatement o	of Your Current	Monthly Income			10		
2A-1Supp) with	this form.	Current Monthly I	tion from Presumption of Ab	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7/2) (Oniciai Pottii			
		ng status? Check one of						
☐ Not mari	Not married. Fill out Column A, lines 2-11.							
			ill out both Columns A and B,	lines 2-11				
_			ou. You and your spouse ar					
Livi	ng in the same	household and are no	t legally separated. Fill out b	oth Columns A and	I B, lines 2-11.			
dec	lare under pena	lty of perjury that you an	<ul> <li>Fill out Column A, lines 2-1 d your spouse are legally sep s that do not include evading t</li> </ul>	arated under nonba	ankruptcy law that applie	es or that yo		
bankruptcy c August 31. If in the result.	the amount of y  Do not include a	. § 101(10A). For exampour monthly income variany income amount more	ed from all sources, derived ple, if you are filing on Septem ied during the 6 months, add t e than once. For example, if b have nothing to report for any	nber 15, the 6-mont he income for all 6 both spouses own t	h period would be March months and divide the the he same rental property	h 1 through otal by 6. F		
				Column A	Column B			
				Debtor 1	Debtor 2 or non-filing spouse			
_	rages, salary, ti roll deductions)	ips, bonuses, overtime ).	, and commissions	\$3,254.03	<u>\$454.22</u>			
Alimony and if Column B is	•	ayments. Do not includ	de payments from a spouse	\$0.00	\$0.00			
expenses of y regular contrib your depende	you or your depoutions from an onte, parents, and	e which are regularly pendents, including ch unmarried partner, mem d roommates. Include re not filled in. Do not inclu	nild support. Include abers of your household, egular contributions from	\$0.00	\$0.00			

on line 3.

የሰ ሰሰ

\$0.00

Column A

Debtor 1

Column B

Debtor 2 or
non-filing spouse

የሰ ሰሰ

\$0.00

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00	\$0.00			
Ordinary and necessary operating - expenses	\$0.00	\$0.00	Сору		
Net monthly income from a business profession, or farm	, <b>\$0.00</b>	\$0.00	here 🗕	\$0.00	\$0.00

#### 6. Net income from rental and other real property

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	\$0.00	\$0.00			
Ordinary and necessary operating — expenses	\$0.00		Conv		
Net monthly income from rental or other real property	\$0.00	\$0.00	Copy here →	\$0.00	\$0.00

#### 7. Interest, dividends, and royalties

٠.	interest, dividends, and royalites	φυ.υυ	Ψ0.00
8.	Unemployment compensation	\$0.00	\$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ......

For you	\$0.00
For your spouse	\$0.00

- Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.
- 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

Total amounts from separate pages, if any.

	otor 1 otor 2		oe Eugene Uvalle na Lynn Uvalle	Case number (if known)				
11.			your total current monthly income.		Column A Debtor 1	Column B  Debtor 2 or non-filing spouse		
	Add lines 2 through 10 for each column.  Then add the total for Column A to the total for Column B.				\$3,254.03 + \$454.22 = \$3,708.25  Total current monthly incom			
Р	art 2:		Determine Whether the Means 1	est Applies to You				
12.	Calcu	late	your current monthly income for the ye	ear. Follow these steps:				
	12a.	Сор	y your total current monthly income from	line 11	Copy lin	<b>ne 11 here</b> → 12a		
		Mult	tiply by 12 (the number of months in a year	ar).			X 12	
	12b.	The	result is your annual income for this part	of the form.		12b	. \$44,499.00	
13.	Calcu	late	the median family income that applies	to you. Follow these steps:				
	Fill in	the s	tate in which you live.	Texas				
	Fill in	the n	number of people in your household.	7				
	Fill in	the n	nedian family income for your state and s	ize of household		13.	\$111,724.00	
			st of applicable median income amounts, s for this form. This list may also be avai					
14.	How o	do th	e lines compare?					
	14a.		Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, check b	oox 1, There is no pre	esumption of abuse.		
	14b.		Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	op of page 1, check box 2, <i>The</i>	presumption of abus	se is determined by I	Form 122A-2.	
P	art 3:		Sign Below					
	By s	ignin	g here, I declare under penalty of perjury	that the information on this sta	atement and in any a	ttachments is true a	nd correct.	
	<b>X</b> /:	s/ Jo	oe Eugene Uvalle	χ /s/ T	ina Lynn Uvalle			
			ugene Uvalle, Debtor 1		Lynn Uvalle, Debtor	2		
	D	oate_	11/21/2019	Date	11/21/2019			
			MM / DD / YYYY		MM / DD / YYYY			
	If yo	u che	ecked line 14a, do NOT fill out or file Forr	n 122A-2.				

If you checked line 14b, fill out Form 122A-2 and file it with this form.